

MICHIGAN DEPARTMENT OF LABOR & ECONOMIC GROWTH

BUREAU OF COMMERCIAL SERVICES

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B

APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN MICHIGAN

For use by Foreign Limited Liability Companies
(Please read information and instructions on last page)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned limited liability company executes the following Application:

1. The name of the limited liability company is:

2. (Complete this item only if the limited liability company name in item 1 is not available for use in Michigan.)
The assumed name of the limited liability company to be used in all its dealings with the Bureau and in the transaction of its business in Michigan is:

3. It is organized under the laws of _____.

The date of its organization is _____.

The duration of the limited liability company if other than perpetual is _____.

4. The address of the office required to be maintained in the state of organization or, if not so required, the principal office of the limited liability company is:

(Street Address)

(City)

(State)

(ZIP Code)

5. a. The address of its registered office in Michigan is:

_____, Michigan _____
(Street Address) (City) (ZIP Code)

b. The mailing address of the registered office if different than above:

_____, Michigan _____
(Street Address or P.O. Box) (City) (ZIP Code)

c. The name of the resident agent at the registered office is:

6. The Department is appointed the agent of the foreign limited liability company for service of process if no agent has been appointed, or if appointed, the agent's authority has been revoked, the agent has resigned, or the agent cannot be found or served through the exercise of reasonable diligence.

The name and address of a member or manager or other person to whom the administrator is to send copies of any process served on the administrator is: **(Must be different than agent shown in Item 5c)**

(Name)

(Street Address) (City) (State) (ZIP Code)

7. The specific business which the limited liability company is to transact in Michigan is as follows:

The limited liability company is authorized to transact such business in the jurisdiction of its organization.

Signed this _____ day of _____, _____

By _____
(Signature)

(Type or Print Name) (Type or Print Title)

Preparer's Name _____

Business Telephone Number _____

INFORMATION AND INSTRUCTIONS

1. This Application For Certificate of Authority must be used to obtain a Certificate of Authority to Transact Business in Michigan. A document required or permitted to be filed under the act cannot be filed unless it contains the minimum information required by the act. This is a legal document and agency staff cannot provide legal advice.
2. Submit one original of this document. Upon filing, the document will be added to the records of the Bureau of Commercial Services. The original will be returned to your registered office address, unless you enter a different address in the box on the front of this document.

Since this document will be maintained on electronic format, it is important that the filing be legible. Documents with poor black and white contrast, or otherwise illegible, will be rejected.

3. This Application is to be used pursuant to the provisions of Article 10 of Act 23, P.A. of 1993, by a foreign limited liability company for the purpose of obtaining a Certificate of Authority to Transact Business in this State. If the foreign limited liability company subsequently changes any of the information set forth in the Application for Certificate of Authority, it must file an Amended Application for Certificate of Authority to Transact Business in Michigan (form C&S 762) with the Bureau not later than 30 days after the time a change becomes effective.
4. Item 2 - A foreign limited liability company whose name is not available for use in Michigan is permitted to apply for a Certificate of Authority under an assumed name which is available for use. The assumed name becomes the limited liability company's name in Michigan to be used in all transactions and in its dealings with the administrator. Item 2 of the Application for Certificate of Authority to Transact Business in Michigan is to be completed for this purpose only. Limited liability companies may also transact business under other assumed names by filing separate Certificates of Assumed Name.
5. Item 6 - The person must be different than agent shown in Item 5(c).
6. Item 7 - This item should state only the specific business to be transacted in Michigan. An all purpose activities statement is not permitted.
7. The Application must be signed by a person with authority to sign as provided in the laws of the jurisdiction of its organization.
8. Attach to this Application a certificate executed by the official of the jurisdiction having custody of limited liability company records stating that the limited liability company is in good standing under the laws of the jurisdiction of its organization. The certificate cannot be dated earlier than 30 days prior to the date of receipt in this office.
9. This document is effective on the date endorsed "Filed" by the Bureau. A later effective date, no more than 90 days after the date of delivery, may be stated.
10. **NONREFUNDABLE FEE:** Make remittance payable to the State of Michigan. Include limited liability company name and identification number on check or money order. **\$50.00**

To submit by mail:

Michigan Department of Labor & Economic Growth
Bureau of Commercial Services
Corporation Division
7150 Harris Drive
P.O. Box 30054
Lansing, MI 48909

To submit in person:

2501 Woodlake Circle
Okemos, MI
Telephone: (517) 241-6470

Fees may be paid by VISA or Mastercard when delivered in person to our office.

MICH-ELF (Michigan Electronic Filing System):

First Time Users: Call (517) 241-6420, or visit our website at <http://www.michigan.gov/corporations>
Customer with MICH-ELF Filer Account: Send document to (517) 241-9845.

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